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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		•
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
·	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	it ii: lo	dentify Yourself		
1.	Your f	full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	your go picture examp license	the name that is on overnment-issued identification (for le, your driver's e or passport).	Joseph First name A. Middle name	First name Middle name
	identifi	identification to your meeting with the trustee.	Miller,, Jr. Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		ner names you have n the last 8 years		
		e your married or n names.		
3.	your S numbe Individ	he last 4 digits of Social Security er or federal dual Taxpayer ication number	xxx-xx-7839	

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De	btor 1 Miller,, Joseph A.	. Jr.	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and		* \$100 \ \text{A. \text{S. } \text{B. } \text{C. } \text{B. } \text{C. } \text{B. } \tex
	Employer Identification Numbers (EIN) you have used in the last 8 years	I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		17701 Park Blvd Lansing, IL 60438-1967	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	5
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 1 Miller,, Joseph A.	<u>Jr. </u>	·····			Case number (if known)			
Olivianos.									
Par	t 2: Tell the Court About	∕our Bankrı	uptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapte	er 7						
		☐ Chapte	er 11						
		☐ Chapte	er 12						
		Chapte	er 13						
8 .	How you will pay the fee	abou If yo	at how yo	ou may pay. Typically, if you a ey is submitting your paymen	re paying the fee you	eck with the clerk's office in your local court for more detail ourself, you may pay with cash, cashier's check, or money ur attorney may pay with a credit card or check with a			
						tion, sign and attach the Application for Individuals to Pay	The		
		☐ I req	uest the	to, waive your fee, and may d	ay request this optio o so only if your inco	on only if you are filing for Chapter 7. By law, a judge may, ome is less than 150% of the official poverty line that appli	es to		
						ents). If you choose this option, you must fill out the <i>Applica</i> 3) and file it with your petition.	ition		
€.	Have you filed for bankruptcy within the last	No.							
	8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being filed by	No							
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
1.	Do you rent your residence?	No.	Go to	line 12.					
		☐ Yes.	Has yo	our landlord obtained an evic	tion judgment again	inst you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	t About an Eviction .	Judgment Against You (Form 101A) and file it as part of	this		

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Del	otor 1 Miller,, Joseph A.	Jr.		Case number (if known)			
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Propr	ietor			
12.	Are you a sole proprietor of any full- or part-time business?	No.	Go to Part 4.				
		☐ Yes.	Name and location of	business			
	A sole proprietorship is a		N				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	ny			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City, S	State & ZIP Code			
	to this petition.		Check the appropriate	box to describe your business:			
			☐ Health Care Bu	usiness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset R	eal Estate (as defined in 11 U.S.C. § 101(51B))			
			Stockbroker (as	s defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Bro	oker (as defined in 11 U.S.C. § 101(6))			
			☐ None of the ab	ove			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of d federal income tax return or if any of these documents do not exist, follow the procedure in 11			
	For a definition of small	No.	lo. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	l am filing under Chap	ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or A	Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is the hazard?				
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	·			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code			
				Canada Sasar Say, Sactor a Elp Codo			

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Case 18-16429 Desc Main Page 5 of 55 Document Debtor 1 Miller,, Joseph A. Jr. Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, if any, receive a briefing about if any, that you developed with the agency. that you developed with the agency. credit counseling before you file for bankruptcy. You must truthfully check one of I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I the following choices. If you counseling agency within the 180 days before I filed cannot do so, you are not filed this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a certificate certificate of completion. eligible to file. of completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you If you file anyway, the court MUST file a copy of the certificate and payment plan, if any. you MUST file a copy of the certificate and payment can dismiss your case, you plan, if any. will lose whatever filing fee you paid, and your creditors I certify that I asked for credit counseling I certify that I asked for credit counseling services can begin collection services from an approved agency, but was from an approved agency, but was unable to obtain activities again. those services during the 7 days after I made my unable to obtain those services during the 7 days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made to requirement, attach a separate sheet explaining what obtain the briefing, why you were unable to obtain it before efforts you made to obtain the briefing, why you were you filed for bankruptcy, and what exigent circumstances unable to obtain it before you filed for bankruptcy, and required you to file this case. what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must file If the court is satisfied with your reasons, you must a certificate from the approved agency, along with a copy of still receive a briefing within 30 days after you file. the payment plan you developed, if any. If you do not do so, You must file a certificate from the approved agency, your case may be dismissed. along with a copy of the payment plan you developed, if any. If you do not do so, your case may be Any extension of the 30-day deadline is granted only for dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. ☐ Incapacity. I have a mental illness or a mental deficiency that I have a mental illness or a mental deficiency that makes me incapable of realizing or making makes me incapable of realizing or making rational rational decisions about finances. decisions about finances. Disability. My physical disability causes me to be unable to My physical disability causes me to be unable to participate in a briefing in person, by phone, participate in a briefing in person, by phone, or through or through the internet, even after I reasonably the internet, even after I reasonably tried to do so. tried to do so. Active duty. Active duty. П I am currently on active military duty in a I am currently on active military duty in a military

military combat zone.

waiver credit counseling with the court.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

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Det	otor 1 Miller,, Joseph A.	Jr.		Case numb	DEF (if known)				
Par	t 6: Answer These Questi	ons for Re	porting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred individual primarily for a personal, family, or household purpose."						
			□ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily for a business or investmer	business debts? Business debts are debts nt or through the operation of the business or	that you incurred to obtain money investment.				
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	owe that are not consumer debts or business	debts				
17.	Are you filing under Chapter 7?	No.	I am not filing under Chapt	ter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. paid that funds will be availa	. Do you estimate that after any exempt proper able to distribute to unsecured creditors?	rty is excluded and administrative expenses are				
	administrative expenses are paid that funds will be		□ No						
	available for distribution to unsecured creditors?		Yes						
18.	How many Creditors do	1-49		1 ,000-5,000	☐ 25,001-50,000				
	you estimate that you owe?	□ 50-99		5001-10,000	5 0,001-100,000				
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000	☐ More than100,000				
19.	How much do you	□ \$0 - \$ <u>\$</u>	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion				
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
	www.d	₩ \$500,0	001 - \$1 million		☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$ {		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion				
******		\$500,0	001 - \$1 million		☐ More than \$50 billion				
Part	7: Sign Below								
For	you	I have exa	mined this petition, and I dec	clare under penalty of perjury that the informat	tion provided is true and correct.				
		If I have of States Co	hosen to file under Chapter de. I understand the relief av	7, I am aware that I may proceed, if eligible, vailable under each chapter, and I choose to p	, under Chapter 7, 11,12, or 13 of title 11, United roceed under Chapter 7.				
		If no attorr have obtai	ney represents me and I did r ined and read the notice requ	not pay or agree to pay someone who is not a uired by 11 U.S.C. § 342(b).	n attorney to help me fill out this document, I				
		I request i	elief in accordance with the	chapter of title 11, United States Code, spe	cified in this petition.				
		cast can	result in fines us to \$250,000	, concealing property, or obtaining money or p 0, or imprisonment for up to 20 years, or both.	property by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	V		A/Miller,, Jr. of Debtor 1	Signature of Debto	or 2				
		Executed		Executed on					
			MM / DD / YYYY	MM.	// DD / YYYY				

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Debtor 1 Miller,, Joseph A	. Јг.	Case number (if known)						
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United States	Code, and have explained	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in					
If you are not represented by an attorney, you do not need to file this page.	which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules							
	/s/ Michael R. Richmond	Date	June 7, 2018					
	Signature of Attorney for Debtor	·	MM / DD / YYYY					
	Michael R. Richmond							
	Printed name							
	Heller & Richmond, Ltd.							
	Firm name							
	33 N Dearborn St Ste 1907							
	Chicago, IL 60602-3828							
	Number, Street, City, State & ZIP Code							
	Contact phone (312) 781-6700	Email address	mrichmond@hellerrichmond.com					
	3124632		•					
	Bar number & State	######################################						

	C	Case 18-16429	Doc 1	Filed 06/08/18 Document	B Entered 06/08/1 Page 8 of 55	8 11:09:01	Desc N	Main
	Fill in	this information to ide	entify your ca	se:				
Deb	otor 1	Joseph A. Mille First Name		dle Name	Last Name			
	otor 2 use if, filing)	First Name	Mido	dle Name	Last Name			
Uni	ted States E	Sankruptcy Court for the	: NORTH	ERN DISTRICT OF IL	LINOIS, EASTERN DIVISION	1		
	se number						_	k if this is an ded filing
Su Be a	mmary s complete rmation. Fi	e and accurate as poss	sible. If two m	arried people are filing are filing are filing are filing are filing are filing are filled are fill	ertain Statistical Ing together, both are equall mation on this form. If you ask at the top of this page.	y responsible for	supplying	
Par	t 1: Sum	marize Your Assets						
							Your a	essets of what you own
1.	Schedule 1a. Copy	e A/B: Property (Official line 55, Total real estate	Form 106A/Be, from Sched	s) ule A/B			\$	80,000.00
	1b. Copy	line 62, Total personal p	property, from	Schedule A/B			\$	23,422.00
	1c. Copy	line 63, Total of all prop	erty on Sched	ule A/B			\$	103,422.00
Par	t 2: Sum	marize Your Liabilities	5				_	
								abilities t you owe
2.		D: Creditors Who Have the total you listed in Co			ll Form 106D) m of the last page of Part 1 of	Schedule D	\$	187,230.00
3.		E/F: Creditors Who Have the total claims from Pa			106E/F) n line 6e o <i>chedule E/F</i>		\$	18,747.00
	3b. Сору	the total claims from Pa	art 2 (nonprior	ity unsecured claims)	from line 6j &chedule E/F		\$	13,394.00
					Yo	our total liabilities	\$	219,371.00
Par	t 3: Sum	nmarize Your Income a	nd Expenses	i				
4.		I: Your Income(Official r combined monthly income		12 oSchedule I			\$	5,293.57
_				1				

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,787.92 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
From Fart 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	18,747.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	18,747.00

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Fill in this in	formation to i	dentify your case						
Debtor 1	Joseph A. N	liller,, Jr.						
F Debtor 2	irst Name	Middle	e Name		Last Name			
	irst Name	Middle	Name		Last Name			
Inited States Bankru	ptcy Court for	the: NORTHER	N DISTRI	CT OF ILLIN	OIS, EASTERN DIVISION			
Case number							г	☐ Check if this is a
					•		•	amended filing
ink it fits best. Be as	A/B: Pi ately list and do complete and a ace is needed, a	roperty escribe items. List a	e. If two ma	arried people	asset fits in more than one are filing together, both are e top of any additional pages,	equally responsible	for supp	ying correct
		ildina land av Oth	aar Daal Ca	otata Vass Osse	n or Have an Interest In			
Yes. Where is the .1 8000 S Black: Street address, if ava	stone Ave	scription		Single-family h Duplex or mult Condominium	i-unit building or cooperative	the amount of any	secured (ns or exemptions. Put claims on <i>Schedule D:</i> Secured by Property.
Chicago	IL	60619-4615		Manufactured (Land	or mobile home	Current value of entire property?	he	Current value of the portion you own?
City	State	ZIP Code	=	Investment pro	perty	\$80,000	0.00	\$80,000.0
			Who ha	Other as an interest Debtor 1 only Debtor 2 only	in the property? Check one		ole, tenan	ir ownership interest cy by the entireties, o
County			`	Debtor 2 only Debtor 1 and D	Debtor 2 only	01 - 1 1641 1		
				At least one of	the debtors and another	(see instruction		unity property
				nformation yo	u wish to add about this iter on number:	n, such as local		
					om Part 1, including any e			\$80,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Del	otor 1 <u>N</u>	/liller,, Jose	eph A. Jr.	Document Page 11 of 55 Case	e number (if known)	
3. C	ars, vans,	, trucks, tract	ors, sport utility vel	nicles, motorcycles		
] No					
	Yes					
3.′	1 Make:	Chrysler		Who has an interest in the property? Check one	the amount of any secur	claims or exemptions. Put ed claims on <i>Schedule D:</i>
	Model: Year:	300 2014		Debtor 1 only		ims Secured by Property.
		mate mileage:	60000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:		☐ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$16,000.00	\$16,000.00
5 4			•	n for all of your entries from Part 2, including any e mber here		\$16,000.00
			onal and Household Ite			
Do	you own o	or have any le	egal or equitable into	erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
[Examples: □ No □	,	urnishings ces, furniture, linens, o	china, kitchenware		
	Yes. De	escribe	household good	ds and furnishings		\$2,600.00
			nouseriola goo	us and runnishings		Ψ2,000.00
	Electronics Examples: ☐ No ☐ Yes. De	Televisions ar including cell	iphone 8, ipad,	2 tablets, 2 old cell phones, 4 year old HP L TVs, playstation 4, HK Onyx Studio		electronic devices \$3,500.00
	collectibles			· •		
į	E <i>xamples:</i> ■ No □ Yes. De	collections, m	figurines; paintings, p nemorabilia, collectibl	rints, or other artwork; books, pictures, or other art obje es	cus; stamp, com, or baseb	all card collections; other
9. E	quipment	for sports ar		other hobby equipment; bicycles, pool tables, golf club	s, skis; canoes and kayak	s; carpentry tools; musical
[□No	monuments				
ı	Yes. De	escribe				.
			workout equipm	nent		\$50.00

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Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Miller,, Jose	ph A. J	Docı r.	ıment	Page 12	2 of 55 Case nur	mber (if known)	
10. Firea								
Exa. ■ No		, shotgur	ns, ammunition, and relate	d equipment	ť			
	s. Describe							
11. Cloti	nes							
_Exa	<i>mpl</i> es: Everyday clo	hes, furs	s, leather coats, designer w	ear, shoes, a	accessories			
□ No	s. Describe							
_ 10	s. Describe	Neces	ssary clohting					\$500.00
2. Jew e					and an include	and the second second second		-9
□ No		eiry, cosi	tume jewelry, engagement	rings, weaair	ig rings, neirio	om jeweiry, watche	es, gems, gola,	silver
■ Ye	s. Describe							
		diamo	ond earings					\$450.00
	farm animals mples: Dogs, cats, b	oirds, hor	ses					
■ No		•						
☐ Ye	s. Describe							
14. Any ■ No	-	l househ	nold items you did not all	eady list, in	cluding any l	health aids you d	id not list	
_	, s. Give specific info	rmation						
	·							
		•	our entries from Part 3,	•	•	pages you have	attached for	\$7,100.00
Par	t 3. Write that num	ber here	·					φ1,100.00
	,							
	Describe Your Finandown or have any le		s quitable interest in any o	f the followi	ina?			Current value of the
,	,	3	,,					portion you own? Do not deduct secured
								claims or exemptions.
l6. Cas ł	1							
_		ave in you	ur wallet, in your home, in a	safe deposit	t box, and on h	nand when you file	your petition	
■ No								
	osits of money <i>mpl</i> es: Checking, sa	vings, or	other financial accounts; c	ertificates of	deposit; share	es in credit unions,	brokerage hous	ses, and other similar
□ No		lf you ha	ve multiple accounts with	he same ins	titution, list ea	ach.		
`	S			Institution	name:			
		17.1.	Checking Account	Bank of	America			\$300.00
		17.2.	Savings Account	Bank of	America			\$22.00
		17.2.	- Cavingo Account					
18. Bon o	ds, mutual funds, o	r public	lv traded stocks					
Exa	mples: Bond funds,	investme	nt accounts with brokerage	firms, mone	y market acco	ounts		
■ No) S		Institution or issuer name	:				
	publicly traded sto t venture	ck and i	nterests in incorporated	and uninco	rporated bus	inesses, includin	g an interest ii	n an LLC, partnership, and
■ No								

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		Case	18-16429	Doc 1	Filed 06/08/18	Entered 06/08/18 1	1:09:01	Desc Main
De	btor 1	Miller,,	Joseph A. Jr.		Document	Page 13 of 55	ber (if known)	
ا	□ Yes.	Give spec	cific information al Name	bout them e of entity:		% of own		
	Negoti Non-n ■ No	iable instrui egotiable in	ments include personstruments are tho	sonal checks, se you cannot out them		otiable instruments ssory notes, and money orders. signing or delivering them.		
			Issue	er name:				
			nsion accounts sts in IRA, ERISA	., Keogh, 401(k), 403(b), thrift savings	accounts, or other pension or p	orofit-sharing p	lans
	■ Yes.	List each a		account: on Plan	Institution n			unknown
	Your s Examp ■ No	hare of all ι	ments with landlor	ou have made	nt, public utilities (electri	e service or use from a company c, gas, water), telecommunication ame or individual:		or others
				navment of m	oney to you either for life	e or for a number of years)		
	■ No	,	·			, e. re. a manizer er yeare,		
	☐ Yes			and description				
	Interest 26 U.S. ■ No	t s in an ed C. §§ 530(t	ucation IRA, in a o)(1), 529A(b), an	n account in d 529(b)(1).	a qualified ABLE prog	ram, or under a qualified state	tuition progr	am.
	☐ Yes		Institution na	me and descri	ption. Separately file the	records of any interests.11 U.S.C	C. § 521(c):	
	■ No	•	or future interes		y (other than anything	listed in line 1), and rights or	powers exerc	isable for your benefit
	<i>Exam</i> µ ■ No	oles: Interne	et domain names,	websites, prod	s, and other intellectua ceeds from royalties and			
	☐ Yes.	Give spec	cific information at	bout them				
	Examµ ■ No	oles: Buildir		ive licenses, c		oldings, liquor licenses, professio	onal licenses	
	☐ Yes.	Give spec	cific information at	bout them				
Мс	oney or	property o	owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	_	unds owe	d to you					
	■ No □ Yes.	Give specit	fic information abo	out them, inclu	ding whether you already	filed the returns and the tax yea	rs	
29.		support oles: Past d	due or lump sum a	alimony, spou	sal support, child suppo	rt, maintenance, divorce settlem	ent, property s	settlement

Official Form 106A/B Schedule A/B: Property page 4

 \square Yes. Give specific information.....

	Ca	se 18-16429	Doc 1	Filed 06/08/18 Document	Entered 06/08/18 11:09:01 Page 14 of 55	Desc Main
De	ebtor 1 Mill	er,, Joseph A. Jr			Case number (if known)	
	Examples: Ui u ■ No	ts someone owes y npaid wages, disabilit npaid loans you mad specific information	ty insurance pa		s, sick pay, vacation pay, workers' compensati	ion, Social Security benefits;
21	Interests in in	nsurance policies				
51.			e insurance; he	ealth savings account (HS	A); credit, homeowner's, or renter's insurance	
		the insurance compa Com	ny of each pol npany name:	icy and list its value.	Beneficiary:	Surrender or refund value:
32.				someone who has died proceeds from a life insur	ance policy, or are currently entitled to receive p	property because someone has
	■ No □ Yes. Give s	specific information				
33.				rou have filed a lawsuit surance claims, or rights	or made a demand for payment to sue	
		ibe each claim				
34.		gent and unliquidate	ed claims of	every nature, including	counterclaims of the debtor and rights to s	et off claims
	■ No □ Yes. Descr	ibe each claim				
	-	assets you did not	already list			
	■ No □ Yes. Give s	specific information				
36					v entries for pages you have attached for	\$322.00
Pa	rt 5: Describe	Any Business-Related	d Property You	Own or Have an Interest In	n. List any real estate in Part 1.	
37.	Do you own or	have any legal or equ	itable interest	in any business-related pro	operty?	
	No. Go to Part					
L	Yes. Go to lin	e 38.				
Pa	rt 6: Describe	Any Farm- and Comm or have an interest in f	nercial Fishing- armland, list it ir	Related Property You Own	or Have an Interest In.	
46.			equitable in	terest in any farm- or co	mmercial fishing-related property?	
	■ No. Go to F □ Yes. Go to					
	☐ res. Go to	lifie 47.				
Pa	rt 7: Desc	cribe All Property You	Own or Have a	an Interest in That You Did	Not List Above	
53.		other property of a		did not already list? ership		
	■ No □ Yes. Give s	pecific information				
54	. Add the dol	lar value of all of vo	our entries fro	om Part 7. Write that nu	mber here	\$0.00
						Ψ0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Miller,, Joseph A. Jr.

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$80,000.00
56.	Part 2: Total vehicles, line 5	\$16,000.00		_
57.	Part 3: Total personal and household items, line 15	\$7,100.00		
58.	Part 4: Total financial assets, line 36	\$322.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$23,422.00	Copy personal property total	\$23,422.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$103,422.00

Official Form 106A/B Schedule A/B: Property page 6 Case 18-16429 Doc 1 Filed 06/08/18 Entered 06/08/18 11:09:01 Desc Main

	usc 10 10425	Docume Docume		
Fill in th	is information to identi	fy your case:		
Debtor 1	Joseph A. Miller	,, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106C			
Schedul	e C: The Pr	operty You C	laim as Exempt	4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	exempt								
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	You are claiming state and federal nonbank	ruptcy exemptions. 11	U.S.C	:. § 522(b)(3)						
	☐ You are claiming federal exemptions. 11 U	.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption					
	,	Copy the value from Schedule A/B	by the value from Check only one box for each exemption.							
	iphone 8, ipad, 2 tablets, 2 old cell phones, 4 year old HP Laptop, fax,	\$3,500.00		\$3,500.00	735 ILCS 5/12-1001(b)					
	scanner, 4 TVs, playstation 4, HK Onyx Studio Speaker,blueray dvd player Line from Schedule A/B 7.1			100% of fair market value, up to any applicable statutory limit						
	workout equipment Line from Schedule A/B 9.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)					
				100% of fair market value, up to any applicable statutory limit						
	Necessary clohting Line from Schedule A/B 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)					
	Zine iidii danadala /VZ TTT			100% of fair market value, up to any applicable statutory limit						
	diamond earings Line from Schedule A/B 12.1	\$450.00		\$450.00	735 ILCS 5/12-1001(b)					
	Line nom Schedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit						
	CTA Pension	Unknown			735 ILCS 5/12-1006					
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit						

Official Form 106C

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3.		laiming a homestead exemption of more than \$160,375? adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
	No	
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No
		Yes

Case 18-16429 Doc 1 Filed 06/08/18 Entered 06/08/18 11:09:01 Desc Main Document Page 18 of 55 Fill in this information to identify your case: Debtor 1 Joseph A. Miller,, Jr. Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor 's name. Do not deduct the that supports this portion value of collateral. claim If any **Acceptance Now** \$2,600.00 Describe the property that secures the claim: \$2.600.00 \$0.00 Creditor's Name household goods and furnishings As of the date you file, the claim is: Check all that 5501 Headquarters Dr Plano, TX 75024-5837 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number \$1,333.00 \$0.00 **Nationwide Loans LLC** Describe the property that secures the claim: \$1,333.00 Creditor's Name As of the date you file, the claim is: Check all that 10255 W Higgins Rd apply. Rosemont, IL 60018-5606 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only

Check if this claim relates to a community debt

Date debt was incurred 2015-09

At least one of the debtors and another

Debtor 1 and Debtor 2 only

Last 4 digits of account number

☐ Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit

Other (including a right to offset)

5513

Debtor 2 only

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Debtor 1 Joseph A. Miller,, Jr.		Case number (f know)		
First Name Middle N	lame Last Name			
2.3 WELLS FARGO Bank	Describe the property that secures the clair	n: \$160,000.00	\$80,000.00	\$80,000.00
Creditor's Name	8000 S Blackstone Ave, Chicago, 60619-4615		<u> </u>	
420 Montgomery St	As of the date you file, the claim is: Check all	Ithat		
San Francisco, CA	apply.	tiat		
94104-1207	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgag	e or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	11011)		
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.4 Wells Fargo Dealer Svc	Describe the property that secures the clair	m: \$23,297.00	\$16,000.00	\$7,297.00
Creditor's Name	2014 Chrysler 300		_	
PO Box 1697	As of the date you file, the claim is: Check all	that		
Winterville, NC	apply.	tiat		
28590-1697	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgag	e or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	loan		
community debt	Other (including a right to offset)	ioun .		
Date debt was incurred 2016-04	Last 4 digits of account number	2740		
	lumn A on this page. Write that number here:	\$187,230.0	0	
If this is the last page of your form, add the Write that number here:	ne dollar value totals from all pages.	\$187,230.0	0	
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed			
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt the we to someone else, list the creditor in Part 1 tyou listed in Part 1, list the additional credito is page.	, and then list the collection agen	cy here. Similarly, if yo	u have more
Name, Number, Street, City, State &		On which line in Part 1 did you ente	er the creditor? 2.4	
Wells Fargo Dealer Service		_		
Attn: Bankruptcy		Last 4 digits of account number 2	140_	
PO Box 19657 Irvine, CA 92623-9657				

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e as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Affe. Property (Official Form 106A/B) hockedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your names number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you?				<u>cument</u> Pa	ne 20 of			
Pelabor 2 Spouse 8, filing) First Name Middle Name Last Name	htor 1	n to identify you	r case:					
Pelabor 2 Spouse 8, filing) First Name Middle Name Last Name		enh A Miller	.lr					
Anited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number				Last	Name		}	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number								
Case number	ouse if, filing) First N	Name	Middle Name	Last	Name			
Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/1 as a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other by executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) check the Nave Claims Secured by Property: If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the lete Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your names number (if known). 2art 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? 1. No. Go to Part 2. 2. List all of your priority unsecured claims against you? 1. If more than one creditor holds a particular claim, list the other creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Part 1. If more than one creditor holds a particular claim, list the other creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Taxes and certain other debts you owe the government	ited States Bankruptcy	Court for the:	NORTHERN DI	STRICT OF ILLINOIS	S, EASTERN	DIVISION		
Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/1 as a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other by executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) check the Nave Claims Secured by Property: If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the lete Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your names number (if known). 2art 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? 1. No. Go to Part 2. 2. List all of your priority unsecured claims against you? 1. If more than one creditor holds a particular claim, list the other creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Part 1. If more than one creditor holds a particular claim, list the other creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Taxes and certain other debts you owe the government	se number							
Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/1 e as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other ye executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106A/B) chedule 6: Executory Contracts and Unexpired Leases (Official Form 1066.) Do not include any creditors with partially secured claims that are listed in: Creditors Who Have Claims Secured by Property, if more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the le continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your names number (if known). 2011: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim, For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Pa. I. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Creditor's Name When was the debt incurred? PO Box 7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Contingent Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Contingent Time of Priority Unsecured claims. Taxes and certain							☐ Ch	eck if this is an
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other creditor or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106AB) to executory contracts on Contracts or unexpired leases (Official Form 106B). Do not include any creditors with partially secured claims that are listed in continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name ase number (if known). Part 1: List All of Your PRIORITY Unsecured Claims I. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor 's name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditor is name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditor in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Unliquidated Debtor 2 only Debtor 2 only Disputed Type of PRIORITY unsecured claim:							am	ended filing
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other creditor or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106AB) to executory contracts on Contracts or unexpired leases (Official Form 106B). Do not include any creditors with partially secured claims that are listed in continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name ase number (if known). Part 1: List All of Your PRIORITY Unsecured Claims I. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor 's name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditor is name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditor in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Unliquidated Debtor 2 only Debtor 2 only Disputed Type of PRIORITY unsecured claim:	ficial Form 106	· - / -						
is as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A)B (chedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your names number (if known). Part 1:			ha Haya Hr	accourad Cla	imo			40/4E
ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your names number (if known). Part1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. Is if the creditor is name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditor is name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditor is name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditories in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Creditor's Name** When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government						ov ovoditovo with N	ONDDIODITY alaims	
chedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Creditors Who Have Claims Secured by Property, if more space is needed, copy the Part you number the entries in the boxes on the lete Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name as number (if known). Part1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you?								
the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your names number (if known). Part 1: List All of Your PRIORITY Unsecured Claims	edule G: Executory Con	tracts and Unexpir	ed Leases (Officia	I Form 106G). Do not i	nclude any cre	ditors with partiall	ly secured claims the	at are listed in Schedul
See number (if known). Part 1: List All of Your PRIORITY Unsecured Claims								
1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes.		is page. If you nav	e no information to	report in a Part, do n	ot file that Pari	. On the top of any	/ additional pages, w	rite your name and
No. Go to Part 2. Yes.		ur PRIORITY Uns	secured Claims					
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identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As mucl possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount Nonpriority According Nonpriority Nonpriority Nonpriority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government	Yes.							
identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As mucl possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount Nonpriority According Nonpriority According Nonpriority No	List all of your priority	unsecured claims.	. If a creditor has mo	ore than one priority uns	secured claim. li	st the creditor separ	rately for each claim. I	For each claim listed.
possible, list the claims in alphabetical order according to the creditor 's name. If you have more than two priority unsecured claims, fill out the Continuation Pa 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim								
Contingent Con								
Internal Revenue Service Priority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Total claim Priority amount Nonprior amount \$1017 \$18,747.00 \$18,747.00 \$18,747.00	1. If more than one cred	itor holds a particula	r claim, list the othe	r creditors in Part 3.				
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□ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: □ At least one of the debtors and another □ Domestic support obligations □ Check if this claim is for a community debt □ Taxes and certain other debts you owe the government	Priority Creditor's N PO Box 7346 Philadelphia,	lame PA 19101-7346	When	was the debt incurred	?	\$18,747.	amount	amount
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City	PA 19101-7346 State Zlp Code	When As of t	was the debt incurred	?	\$18,747.	amount	amount
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	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City Who incurred the det Debtor 1 only Debtor 2 only Debtor 1 and Debtor	PA 19101-7346 State Zlp Code ot? Check one.	As of the Color of Co	was the debt incurred the date you file, the c ntingent liquidated sputed of PRIORITY unsecure	laim is: Check	\$18,747.	amount	amount
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	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City Who incurred the det Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the	PA 19101-7346 State Zlp Code ot? Check one. or 2 only debtors and another	When As of 1 Coi Uni Dis Type coi Topointy debt	was the debt incurred the date you file, the c ntingent liquidated sputed of PRIORITY unsecure mestic support obligation xes and certain other de	d claim:	\$18,747.	amount .00 \$18,747	amount
	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City Who incurred the det Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the Check if this clain	PA 19101-7346 State Zlp Code ot? Check one. or 2 only debtors and another	As of t Col Uni Type of Dois Type of Classify debt	was the debt incurred the date you file, the c ntingent liquidated sputed of PRIORITY unsecure mestic support obligatio xes and certain other de	d claim:	\$18,747.	amount .00 \$18,747	amount
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3. Do any creditors have nonpriority unsecured claims against you?	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City Who incurred the det Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the Check if this claim Is the claim subject to No Yes	PA 19101-7346 State ZIp Code ot? Check one. or 2 only debtors and another is for a communio	As of the Color Co	was the debt incurred the date you file, the contingent liquidated sputed of PRIORITY unsecure mestic support obligation xes and certain other de aims for death or personner. Specify	d claim:	\$18,747.	amount .00 \$18,747	amount
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City Who incurred the det Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the Check if this claim Is the claim subject to No Yes The Check In the	PA 19101-7346 State ZIp Code ot? Check one. or 2 only debtors and another in is for a communio o offset?	As of the Color Co	was the debt incurred the date you file, the contingent liquidated sputed of PRIORITY unsecure mestic support obligation xes and certain other dealims for death or personner. Specify	d claim:	\$18,747.	amount .00 \$18,747	amount
■ Yes.	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City Who incurred the det Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the Check if this claim Is the claim subject to No Yes Tt 2: List All of You	PA 19101-7346 State ZIp Code ot? Check one. or 2 only debtors and another in is for a communio o offset?	As of the Color Co	was the debt incurred the date you file, the contingent liquidated sputed of PRIORITY unsecure mestic support obligation xes and certain other de aims for death or person her. Specify ms t you?	laim is: Check d claim: ons ebts you owe the al injury while y	\$18,747.	amount .00 \$18,747	amount
	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City Who incurred the det Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the Check if this claim Is the claim subject to No Yes The Check of the Check of this claim Is the claim subject to No	PA 19101-7346 State ZIp Code ot? Check one. or 2 only debtors and another in is for a communio o offset?	As of the Color Co	was the debt incurred the date you file, the contingent liquidated sputed of PRIORITY unsecure mestic support obligation xes and certain other de aims for death or person her. Specify ms t you?	laim is: Check d claim: ons ebts you owe the al injury while y	\$18,747.	amount .00 \$18,747	amount
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page 1.	Priority Creditor's N PO Box 7346 Philadelphia, Number Street City Who incurred the det Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the Check if this claim Is the claim subject to No Yes Tt 2: List All of You Do any creditors have No. You have nothin Yes.	PA 19101-7346 State ZIp Code ot? Check one. or 2 only debtors and another in is for a communi o offset? ur NONPRIORITY nonpriority unsecu	As of the Cool Cool Cool Cool Cool Cool Cool Coo	was the debt incurred the date you file, the contingent liquidated sputed of PRIORITY unsecure mestic support obligation xes and certain other deatims for death or person mer. Specify ms t you? to the court with your of	laim is: Check d claim: ns ebts you owe the al injury while y	\$18,747.	amount .00 \$18,747	amount 5

Total claim

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Debtor 1 Miller,, Joseph A. Jr. Case number (if know) 4.1 12 WEBBANK FINGERHUT \$691.00 Last 4 digits of account number 2932 Nonpriority Creditor's Name When was the debt incurred? 2017-03-28 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Open account 4.2 **ATT U-VERSE** \$2,623.00 Last 4 digits of account number 4351 Nonpriority Creditor's Name When was the debt incurred? 2018-04 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Open account ☐ Yes 4.3 **Capital One** Last 4 digits of account number 8286 \$2,437.00 Nonpriority Creditor's Name When was the debt incurred? 2015-10 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes

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Debtor 1 Miller,, Joseph A. Jr. Case number (if know) 4.4 CHECK N GO OF ILLINOIS, INC. \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2010 River Oaks Dr Calumet City, IL 60409-5074 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.5 **CITY OF CHICAGO** Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name When was the debt incurred? **DEPARTMENT OF REVENUE** 121 N. LaSalle St. Rm 107A Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify parking ticket fine ☐ Yes 4.6 **Community Hospital** Last 4 digits of account number \$176.00 5389 Nonpriority Creditor's Name When was the debt incurred? 2017-12-18 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Open account

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Debtor 1 Miller,, Joseph A. Jr. Case number (if know) 4.7 \$833.00 Credit One Bank, N.A. Last 4 digits of account number 3393 Nonpriority Creditor's Name When was the debt incurred? 2017-07 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Open account 4.8 **Dsnb Macys** Last 4 digits of account number \$887.00 4416 Nonpriority Creditor's Name When was the debt incurred? 2016-09 PO Box 8218 Mason, OH 45040-8218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes 4.9 First Premier Bank Last 4 digits of account number 2998 \$547.00 Nonpriority Creditor's Name When was the debt incurred? 2016-03 601 S Minnesota Ave Sioux Falls, SD 57104-4824 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes

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Case number (fr know)

Debtor	1 Miller,, Joseph A. Jr.	——————	Case number (if know)	
4.10	Illinois Tollway Authority Nonpriority Creditor's Name	Last 4 digits of account num When was the debt incurred		\$1,000.00
	2700 Ogden Ave Downers Grove, IL 60515 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the o		-
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	ecured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a report as priority claims	separation agreement or divorce that you did not	
	No	☐ Debts to pension or profit-	sharing plans, and other similar debts	
	Yes	Other. Specify		-
4.11	Speedy Cash Nonpriority Creditor's Name	Last 4 digits of account num	nber	\$1,200.00
		When was the debt incurred		_
	848 E Sibley Blvd Dolton, IL 60419-2136 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the o	laim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	ecured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	separation agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-	sharing plans, and other similar debts	
	Yes	Other. Specify		-
Part 3:	List Others to Be Notified About a De	bt That You Already Listed		
is tryi	ng to collect from you for a debt you owe to s	omeone else, list the original credi at you listed in Parts 1 or 2, list the	hat you already listed in Parts 1 or 2. For exampl for in Parts 1 or 2, then list the collection agency additional creditors here. If you do not have add	here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 di	· _	
•	al One Bankruptcy	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai ☐ Part 2: Creditors with Nonpriority Unsecured	
PO B	ox 30285		Part 2: Creditors with Nonphority Onsecured	Claims
Salt L	ake City, UT 84130-0285	Last 4 digits of account number	8286	
	nd Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
COOF	RECORDER OF DEEDS	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Clai	ms
		Last 4 digits of account number	□ Part 2: Creditors with Nonpriority Unsecured 1017	Claims
Name a	nd Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
First	Premier Bank	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms
	ox 5524		■ Part 2: Creditors with Nonpriority Unsecured	Claims
Sioux	Falls, SD 57117-5524	Last 4 digits of account number	2998	
Name a	nd Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	

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Debtor 1 M	liller,, Joseph A. Jr.	Document Page	e 25 of 55 Case number (f know)
I C System	n Inc	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 64378			■ Part 2: Creditors with Nonpriority Unsecured Claims
Saint Paul	, MN 55164-0378	Last 4 digits of account number	4351
Name and Add		On which entry in Part 1 or Part 2 did	
I C System 444 Highw		Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	, MN 55127-2557		■ Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number	4351
Name and Add		On which entry in Part 1 or Part 2 did	
	& Casbon, Pc ections Department	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
9650 Gord	lon Dr		■ Part 2: Creditors with Nonpriority Unsecured Claims
Highland,	IN 46322-2909	Last 4 digits of account number	5389
Name and Add		On which entry in Part 1 or Part 2 did	
Komyatted 9650 Gord		Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	IN 46322-2909		■ Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number	5389
Name and Add		On which entry in Part 1 or Part 2 did	· _
Lvnv Fund PO Box 12	•	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	, SC 29602-1269		■ Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number	2932
Name and Add	dress ding/Resurgent Capital	On which entry in Part 1 or Part 2 did Line 4.1 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 10		Line 4.1 or (Check one).	Part 2: Creditors with Nonpriority Unsecured Claims
Greenville	, SC 29603-0497	Last 4 digits of account number	2932
		-	
Name and Add Midland F		On which entry in Part 1 or Part 2 did Line 4.7 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
2365 North	hside Dr Ste 30		■ Part 2: Creditors with Nonpriority Unsecured Claims
San Diego	o, CA 92108-2709	Last 4 digits of account number	3393
Name and Add	drees	On which entry in Part 1 or Part 2 dic	
Midland F	unding	Line <u>4.7</u> of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	hside Dr Ste 300		■ Part 2: Creditors with Nonpriority Unsecured Claims
San Diego	o, CA 92108-2709	Last 4 digits of account number	3393
Name and Add	dress	On which entry in Part 1 or Part 2 did	d you list the original creditor?
	Store National	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Bank/Macy Attn: Bank			■ Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 80			
Mason, Ol	H 45040-8053	Last 4 digits of account number	4446
		Last 4 digits of account number	4416
Part 4: A	dd the Amounts for Each Type of	Unsecured Claim	
	nounts of certain types of unsecured ecured claim.	claims. This information is for statistic	cal reporting purposes only. 28 U.S.C. §159. Add the amounts for each
			Total Claim
Total claims	6a. Domestic support obligati	ons	6a. \$
from Part 1		ebts you owe the government	6b. \$ 18,747.00
	6c. Claims for death or person	nal injury while you were intoxicated	6c. \$ 0.00

Official Form 106 E/F

6d.

6d. Other. Add all other priority unsecured claims. Write that amount here.

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Debtor 1 Miller,, Joseph A. Jr.

	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	18,747.00
Total claims	6f.	Student loans	6f.	\$	Total Claim 0.00
from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		\$ \$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	13,394.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	13,394.00

Official Form 106 E/F

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		17(1)		
Fill in th	nis information to identi	fy your case:		
Debtor 1	Joseph A. Miller	, Jr.		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case number				
(if known)				☐ Check if this is a
				l amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Acceptance Now 5501 Headquarters Dr Plano, TX 75024-5837	Installment account opened 2/1/2018 Credit Limit: \$6,859.00, Remaining Balance: \$6,500.00

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		Docum	ent Page 28 of	55		
Fill in this	information to identify	your case:				
Debtor 1	Joseph A. Miller,,	Jr.				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	cruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS, EASTERN	DIVISION		
Case number					☐ Check if this is an amended filing	n
Official For Schedule I	m 106H H: Your Cod e	ebtors			1	12/15
are filing together, and number the en case number (if kn	both are equally responderies in the boxes on tool own). Answer every quartering the second contract of the second	onsible for supplying c he left. Attach the Addi uestion.	orrect information. If more tional Page to this page. O	space is needed, co n the top of any Add	as possible. If two married py the Additional Page, fill litional Pages, write your n	it out,
1. Do you hav	e any codebtors? (If yo	ou are filing a joint case, o	do not list either spouse as a	codebtor.		
□ No						
■ Yes						
			roperty state or territory? (p, Texas, Washington, and V		states and territories include	Arizona,
■ No. Go to li	ne 3					
		e, or legal equivalent live	with you at the time?			
line 2 again as	s a codebtor only if tha	it person is a guarantoi	or cosigner. Make sure ye	ou have listed the cre	with you. List the person sheditor on Schedule D (Office E/F, or Schedule G to fill	cial Form
	1: Your codebtor nber, Street, City, State and ZIF	² Code		Column 2: The cred Check all schedules	ditor to whom you owe the s that apply:	debt
ATTN: 5501 H	ance Now AcceptanceNOW C eadquarters Dr TX 75024-5837	ustomer Service / B		☐ Schedule D, lii ☐ Schedule E/F, ■ Schedule G Acceptance Nov	line 2.1	

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=:11	in this information to identify									
	in this information to identify your case btor 1									
De	btor 2				_					
	ited States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS, EAS	STERN						
	se number nown)		-			☐ An ☐ A s		ed filing	g postpetition owing date:	chapter 13
<u>O</u>	fficial Form 106I					MM	// DD/ Y	YYYY		
S	chedule I: Your Inco	me								12/15
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. On the control of th	spouse is not filing wit	h you, do not includ	e informa	atio	n about yo case numb	ur spou er (if kn	se. If mor	e space is ne	eded,
	information.						☐ Empl		iiiig spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	ed			☐ Not employed			
	employers.	Occupation	switchman							
	Include part-time, seasonal, or self-employed work.	Employer's name	СТА							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed th	nere? 10 year	rs			_			
Pa	rt 2: Give Details About Mont	thly Income								
	mate monthly income as of the dat ss you are separated.	e you file this form. If y	ou have nothing to rep	ort for an	y line	e, write \$0 ii	n the spa	ace. Includ	le your non-filir	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this form		oine the information fo	r all empl	oyers	s for that pe	erson on	the lines b	elow. If you ne	ed more
						For Debte	or 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	8,8	43.81	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	8,843	3.81	\$	N/A	

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Deb	tor 1	Miller,, Joseph A. Jr.	-	Case	number (if known)			
				For	Debtor 1	For Debtor		
	Copy	y line 4 here	4.	\$	8,843.81	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,383.18	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	1,194.86	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	67.47	\$	N/A	
	5e.	Insurance	5e.	\$_	351.86	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	63.25	\$	N/A	
	5h.	Other deductions. Specify: _tax Levy Federal	5h.+	\$	384.84	+ \$	N/A	
		Special Dues		\$	11.92	\$	N/A	
		Public Debt	_	\$	92.86	\$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	3,550.24	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,293.57	\$	N/A	
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	<u> </u>	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	^ψ –	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	* — \$	0.00	\$	N/A	
	8g.	Pension or retirement income	— _{8g.}	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$_		+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$,	5,293.57 + \$_	N/A	= \$	5,293.57
11.	Inclu other	e all other regular contributions to the expenses that you list in Schedule and econtributions from an unmarried partner, members of your household, your dear friends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not available:	penden		,		+\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					Combine	
13.	Do y ■ □	vou expect an increase or decrease within the year after you file this form? No. Yes. Explain:					monthly	income

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Fill in this info	ormation to identify you	r case:				
Debtor 1	Joseph A. Mil				k if this is: An amended filing	
Debtor 2 (Spouse, if filing	g)				ū	ing postpetition chapter 13 ollowing date:
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLING	DIS,	-	MM / DD / YYYY	
Case number (If known)						
	Form 106J					
	ule J: Your E	-	C.C			12/15
information. (if known). A Part 1: 1. Is this a						
☐ Yes.	Does Debtor 2 live in ☐ No	a separate household? file Official Form 106J-2, Expenses f	or Separate Housek	oldof Debtor	2	
		□ No	or ocparate riouser	lold of Debtol	2.	
•	ist Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	state the ents names.		Daughter			□ No ■ Yes
			Daughter			☐ No ■ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No
expens	r expenses include es of people other tha If and your dependent	1 1 Voo				☐ Yes
Estimate yo	of a date after the ba	g Monthly Expenses ır bankruptcy filing date unless yo nkruptcy is filed. If this is a supple				
	h assistance and have	on-cash government assistance if ye included it on Schedule I: Your I			Your expe	enses
	ntal or home ownershi ts and any rent for the g	p expenses for your residence. Inc ground or lot.	clude first mortgage	4. \$		1,350.00
If not in	cluded in line 4:					
4a. F	teal estate taxes			4a. \$		0.00
	roperty, homeowner's, o			4b. \$		0.00
	•	air, and upkeep expenses		4c. \$		0.00
		n or condominium dues I ts for your residence , such as hom	e equity loans	4d. \$ 5. \$		0.00
		,		σ. ψ		0.00

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btor 1	Miller,, Joseph A. Jr.	Case num	ber (if known)	
. Utili	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	410.00
6d.	Other. Specify:	6d.	-	0.00
	d and housekeeping supplies	— 7.	·	430.00
	d and nodeccepting supplies	8.	·	
_				950.00
	thing, laundry, and dry cleaning	9.	·	100.00
	sonal care products and services	10.		50.00
	lical and dental expenses	11.	\$	50.00
	nsportation. Include gas, maintenance, bus or train fare.	10	œ.	300.00
	not include car payments.	12.	·	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	· -	0.00
4. Cha	ritable contributions and religious donations	14.	\$	0.00
	ırance.			
	not include insurance deducted from your pay or included in lines 4 or 20.		•	
	Life insurance	15a.	·	175.00
	. Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	200.00
15d	. Other insurance. Specify:	15d.	\$	0.00
. Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	cify:	16.	\$	0.00
	allment or lease payments: Car payments for Vehicle 1	17a.	\$	585.00
	• •	17a.		
	. Car payments for Vehicle 2		·	0.00
	Other. Specify:	17c.		0.00
	Other. Specify:	17d.	\$	0.00
	Ir payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.	10.	\$	0.00
		19.	Ψ	0.00
	cify: er real property expenses not included in lines 4 or 5 of this form or on Schedu		ır Incomo	
20a		20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
20d	. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify:	21.	+\$	0.00
. Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	4.850.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$.,500.00
			l : 	4 050 00
22C	Add line 22a and 22b. The result is your monthly expenses.		\$	4,850.00
	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,293.57
23b	. Copy your monthly expenses from line 22c above.	23b.	-\$	4,850.00
				•
23c.	Subtract your monthly expenses from your monthly income.			440.57
	The result is your monthly net income.	23c.	\$	443.57
For 6	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your iffication to the terms of your mortgage?			or decrease because of
	NO.			
■ N				

Debtor 1	formation to identify yo				
Debior	Joseph A. Miller, First Name	, Jr. Middle Name	Last Name		
Debtor 2		Wildelie Hallie	Edot Hamo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS, EASTER	RN DIVISION	
Case number					
(if known)					☐ Check if this is an amended filing
Official Form			l Dolokovic O) f	
Declarat	S JUOGA NOI	in individua	l Debtor's S	cneaules	12/15
	8 U.S.C. §§ 152, 1341, 18 n Below	519, and 35/1.			
Did you pa	y or agree to pay some	one who is NOT an attor	rney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
Under penal	ty of perjury, I declare to	hat I have read the sum	mary and schedules file	ed with this declaration	and
Joseph Signatur	A. Miller,, Jr. e of Debtor 1		X Signature	of Debtor 2	
Date	luna 7 2019		Data		

	Fill in this	information to ident	ify your case:			
Debto	r 1	Joseph A. Mille		-		
Debto	r 2	First Name	Middle Name	Last Name		
	e if, filing)	First Name	Middle Name	Last Name		
United	d States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS, EASTERN DIVI	SION	
Case (if know	number				-	Check if this is an mended filing
Offic	cial For	m 107				
			Affairs for Individ	uals Filing for B	ankruptcy	4/1
inform	ation. If mo		ole. If two married people are attach a separate sheet to thi			
Part 1	Give De	tails About Your Ma	rital Status and Where You L	ived Before		
1. W	/hat is your	current marital statu	s?			
	Married Not marri	ed				
2. D	uring the las	t 3 years, have you	lived anywhere other than wh	ere you live now?		
	No Yes. List	all of the places you liv	red in the last 3 years. Do not inc	clude where you live now.		
C	ebtor 1 Pric	r Address:	Dates Debtor 1 liv	ved Debtor 2 Prior Add	Iress:	Dates Debtor 2 lived there
			er live with a spouse or legal fornia, Idaho, Louisiana, Neva			
	l No l Yes. Mak	e sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Officia	al Form 106H).		
Part 2	Explain	the Sources of You	Income			
Fil	II in the total	amount of income you	ployment or from operating a ureceived from all jobs and all ave income that you receive tog	businesses, including part-ti	me activities.	ar years?
	l No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	Wages, commissions, bonuses, tips	\$56,874.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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De	ebtor 1 N	liller,, Jose	ph A. Jr.		Case	e number(if known)	
				Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	or last cale anuary 1 to	ndar year: December	31, 2017)	Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
		dar year be December		Wages, commissions, bonuses, tips	\$58,285.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	other pub you are fil List each	lic benefit pay ing a joint ca	ments; pens se and you ha	er that income is taxable. Examions; rental income; interest; divave income that you received to me from each source separatel	vidends; money collected from gether, list it only once under E	lawsuits; royalties; and gamb Debtor 1. you listed in line 4.	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for E	Bankruptcy		
6.	Are eithe □ No.	Neither De	btor 1 nor I	's debts primarily consumer Debtor 2 has primarily consul personal, family, or household	mer debts . Consumer debts a	are defined in 11 U.S.C. § 101	(8) as "incurred by an
		□ No.	90 days befo	ere you filed for bankruptcy, did	you pay any creditor a total of	\$6,425* or more?	
		Yes * Subject	creditor. D payments t	each creditor to whom you paid o not include payments for dor o an attorney for this bankrupto t on 4/01/19 and every 3 years a	nestic support obligations, su y case.	ch as child support and alimo	
	Yes.			or both have primarily consul are you filed for bankruptcy, did		\$600 or more?	
		No.	Go to line	7.			
		☐ Yes		each creditor to whom you paid or domestic support obligations ptcy case.			
	Creditor	's Name and	Address	Dates of payme	nt Total amount paid	Amount you Was this still owe	payment for
7.	<i>Insiders</i> ir which you	iclude your re are an office	latives; any g r, director, pe	bankruptcy, did you make a general partners; relatives of any erson in control, or owner of 20° rietor. 11 U.S.C. § 101. Include	y general partners; partnership % or more of their voting secur	s of which you are a general pities; and any managing agen	partner; corporations of t, including one for a
	■ No	List all naves	ante ta ca la	sider			
		List all paym Name and		Dates of payme	nt Total amount	Amount you Reason still owe	for this payment

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De	ebtor 1 Miller,, Joseph A. Jr.		Cas	e number(if known)		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cosi		yments or transfer an	ny property on ac	count of a debt 1	that benefited an
	No	g				
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	
Pa	art 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the o	case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, for	reclosed, garnish	ed, attached, sei	ized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
	Orealtor Name and Address			Date		property
	Internal Rev Service PO Box 7346	Explain what happene		May	2018	\$2,486.00
	Philadelphia, PA 19101-7346	☐ Property was reposs ☐ Property was foreclo ☐ Property was garnish	sed.			
		Property was attached	ed, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became No Yes. Fill in the details. Creditor Name and Address				action was	ints from your Amount
12	Within 1 year before you filed for bankrupto	cv was any of your prop	erty in the nossession			f creditors a
	court-appointed receiver, a custodian, or a		only in the pedebook	or an accignos		, orountoro, a
	■ No □ Yes					
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup No	tcy, did you give any gift	s with a total value of	f more than \$600	per person?	
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 person	per Describe the gifts	;	Dates the gi	you gave	Value
	Person to Whom You Gave the Gift and Address:			gi		

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Case number (if known)

14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?						
	Yes. Fill in the details for each gift or co	ntribution.					
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Dates you contributed	Value			
	New Covenant Missionary Baptist Church 754 E 77th St Chicago, IL 60619-2553	tithes	\$300 monthly	\$7,200.00			
Pa	rt 6: List Certain Losses						
15.	Within 1 year before you filed for bankrup or gambling?	otcy or since you filed for bankruptcy, did you lose any	ything because of theft	fire, other disaster,			
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property los			
Pa	rt 7: List Certain Payments or Transfers						
	consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pre No Yes. Fill in the details.	otcy, did you or anyone else acting on your behalf pay reparing a bankruptcy petition? eparers, or credit counseling agencies for services required		, ,			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount o paymen			
	Heller & Richmond, Ltd. 33 N Dearborn St Ste 1907 Chicago, IL 60602-3828	0.00	06/07/18	\$43.00			
17.		otcy, did you or anyone else acting on your behalf pay itors or to make payments to your creditors? ou listed on line 16.	or transfer any propert	y to anyone who			
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
18.	transferred in the ordinary course of your Include both outright transfers and transfers ugifts and transfers that you have already listed	made as security (such as the granting of a security interest					
	No						
	Yes. Fill in the details.	Description and velocies		Data transferre			
	Person Who Received Transfer Address	property transferred paymen	e any property or its received or debts exchange	Date transfer was made			
	Person's relationship to you		•				

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Debtor 1 Miller,, Joseph A. Jr.

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De	btor 1 Miller,, Joseph A. Jr.			Case nun	nber(if known)	
	beneficiary? (These are often called asset-prote ■ No □ Yes. Fill in the details. Name of trust	ection devices.) Description and	value of the pro	operfy trans	.ferred	Date Transfer was
		Doosilpuoli alia	talao or illo pro	porty traine		made
Pa	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or lowes, pension funds, cooperatives, associated No	r other financial accou	nts; certificates	of deposit;		
	Yes. Fill in the details.				en de la companya de La companya de la co	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed for	r bankruptcy, ar	ıy safe dep	osit box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	r place other than you	home within 1	year before	you filed for bankruptcy	1?
	■ No					
	☐ Yes. Fill in the details,					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control f					
	Do you hold or control any property that son someone.		ude any propert	y you borro	owed from, are storing fo	r, or hold in trust for
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Info	rmation [,]				
For	the purpose of Part 10, the following definition	ns apply:				
	Environmental law means any federal, state, toxic substances, wastes, or material into the controlling the cleanup of these substances,	air, land, soil, surface				

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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De	btor	1 Miller,, Joseph A. Jr.		Case number(if known)	
24.	Has	s any governmental unit notified you that	t you may be liable or potentially liable ur	nder or in violation of an environn	nental law?
	<u> </u>	No			
		Yes. Fill in the details.			
		ime of site idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Hav	ve you notified any governmental unit of	any release of hazardous material?		
		No Yes. Fill in the details.			
		nme of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Hav	∕e you been a party in any judicial or adm	ninistrative proceeding under any enviror	nmental law? Include settlements	and orders.
		No			
		Yes. Fill in the details.			
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	rt 11:	Give Details About Your Business or C	Connections to Any Business		
27.	Witl	hin 4 years before you filed for bankrupte	cy, did you own a business or have any o	f the following connections to an	y hysinass?
			a trade, profession, or other activity, eit		y business?
			any (LLC) or limited liability partnership (
			any (CCC) or infinited hability partnership (LLP)	
		☐ A partner in a partnership			
		☐ An officer, director, or managing exe			
		☐ An owner of at least 5% of the voting	or equity securities of a corporation		
		No. None of the above applies. Go to Pa	art 12.		
		Yes. Check all that apply above and fill	in the details below for each business.		
		siness Name	Describe the nature of the business	Employer Identification numb	er
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Securit Dates business existed	y number or ITIN.
28.	With	nin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement to a	nyone about your business? Incl	ude all financial
		No			
		Yes. Fill in the details below.			
	Nar	ne	Date Issued		
		dress nber, Street, City, State and ZIP Code)			
Par	t 12:	Sign Below			
rue banj	and (crupt	correct. I understand that making a false	ncial Affairs and any attachments, and I of statement, concealing property, or obtai D, or imprisonment for up to 20 years, or I	ning money or property by fraud	hat the answers are in connection with a
Jøs Sig	seph natur	A. Miller,, Jr. re of Debtor 1	Signature of Debtor 2		
Dat	e <u>J</u>	June 7, 2018	Date		

Official Form 107

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Debtor 1	Miller,, Joseph A. Jr.	Case number(if known)
Did you att ■ No □ Yes	tach additional pages to <i>Your Statement of Financial A</i>	ffairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pa ■ No	y or agree to pay someone who is not an attorney to h	elp you fill out bankruptcy forms?
☐ Yes. Na	me of Person Attach the Bankruptcy Petition Prepa	arer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Miller,, Joseph A. Jr.		Case No.			
		Debtor(s)	Chapter	13		
	DISCLOSURE OF COMPEN	SATION OF ATTO	ORNEY FOR D	EBTOR		
C	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankrupto	y, or agreed to be pai	d to me, for services rea		
	For legal services, I have agreed to accept		\$	4,000.00		
	Prior to the filing of this statement I have received		\$	43.00		
	Balance Due		\$	3,957.00		
2. T	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. T	he source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4. I	I have not agreed to share the above-disclosed compen firm.	sation with any other perso	on unless they are men	nbers and associates of	my law	
[☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				nw firm. A	
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
b c.	Analysis of the debtor's financial situation, and rendering. Preparation and filing of any petition, schedules, statem. Representation of the debtor at the meeting of creditors. [Other provisions as needed]	nent of affairs and plan whi	ch may be required;	•	ruptcy;	
6. B	by agreement with the debtor(s), the above-disclosed fee d	loes not include the followi	ng service:			
	(CERTIFICATION				
	certify that the foregoing is a complete statement of any aunkruptcy proceeding.	ngreement or arrangement f	or payment to me for	representation of the de	ebtor(s) in	
Ju	ine 8, 2018				_	
Da	nte	Michael R. Richi				
		Signature of Attorn Heller & Richmo				
		33 N Dearborn S	St Ste 1907			
		Chicago, IL 6060		_		
			Fax: (312) 781-673 llerrichmond.com	2		
		Name of law firm	non iciniiona.com		_	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Miller,, Joseph A. Jr.		_ Case No.		
		Debtor(s)	Chapter		
	DISCLOSURE OF COMPEN	SATION OF ATTOR	NEY FOR D	EBTOR	
cc	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) empensation paid to me within one year before the filing expended on behalf of the debtor(s) in contemplation of the debtor(s).	of the petition in bankruptcy, or	agreed to be paid	d to me, for services rende	ered or to
			\$	4,000.00	
	Prior to the filing of this statement I have received		\$	43.00	
	Balance Due		\$	3,957.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclosed compen firm.	sation with any other person un	less they are men	bers and associates of m	y law
	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name.				firm. A
5. II	return for the above-disclosed fee, I have agreed to rend	der legal service for all aspects of	of the bankruptcy	case, including:	
b. с.	Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors [Other provisions as needed]	nent of affairs and plan which m	ay be required;		tcy;
6. B	y agreement with the debtor(s), the above-disclosed fee d	loes not include the following so	ervice:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for pa	ayment to me for	representation of the debt	or(s) in
Ju	ne 7, 2018	/s/ Michael R. Richm	nond		
Da	te	Michael R. Richmon Signature of Attorney	d		
		Heller & Richmond,	Ltd.		
		33 N Dearborn St St	e 1907		
		Chicago, IL 60602-3			
		(312) 781-6700 Fax mrichmond@hellerr		4	
		Name of law firm			

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

preparation of petition and related Schedules

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney received \$\frac{43.00}{2.00}\$ toward the flat fee, leaving a balance due of \$\frac{3,957.00}{2}\$; and \$\frac{3}{10.00}\$ for expenses, leaving a balance due of \$\frac{0}{2}\$.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: <u>6/4/18</u>	<u> </u>	ſ	
Signed:	<i>y</i>	•	1 1
1 × /-/2 / //-			
Debtor(s)		Attorney for the Debto	r(s)

Do not sign this agreement if the amounts are blank.

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United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case No.	
Miller,, Joseph A. Jr.		Chapter 13	
	Debtor(s)		
	VERIFICATION OF CREDITO	R MATRIX	
		Number of Creditors	25
The above-named Debtor(s) hereby verifies that the list of creditors is true	e and correct to the best of my (our) knowledg	ŗe.
Date: June 7, 2018	Debtor M		
	Joint Debtor		- Audenius service en

Acceptance Now
ATTN: AcceptanceNOW Customer Service / B
5501 Headquarters Dr
Plano, TX 75024-5837

Acceptance Now 5501 Headquarters Dr Plano, TX 75024-5837

Capital One 15000 Capital One Dr Richmond, VA 23238-1119

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

CHECK N GO OF ILLINOIS, INC. 2010 River Oaks Dr Calumet City, IL 60409-5074

CITY OF CHICAGO DEPARTMENT OF REVENUE 121 N. LaSalle St. Rm 107A Chicago, IL 60602

Dsnb Macys PO Box 8218 Mason, OH 45040-8218 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104-4824

First Premier Bank PO Box 5524 Sioux Falls, SD 57117-5524

I C System Inc PO Box 64378 Saint Paul, MN 55164-0378

I C System Inc 444 Highway 96 E Saint Paul, MN 55127-2557

Illinois Tollway Authority 2700 Ogden Ave Downers Grove, IL 60515

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Komyatte & Casbon, Pc Attn: Collections Department 9650 Gordon Dr Highland, IN 46322-2909 Komyattecasb 9650 Gordon Dr Highland, IN 46322-2909

Lvnv Funding PO Box 1269 Greenville, SC 29602-1269

Lvnv Funding/Resurgent Capital PO Box 10497 Greenville, SC 29603-0497

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108-2709

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108-2709

Nationwide Loans LLC 10255 W Higgins Rd Rosemont, IL 60018-5606

Speedy Cash 848 E Sibley Blvd Dolton, IL 60419-2136 Visa Dept Store National Bank/Macy's Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053

WELLS FARGO Bank 420 Montgomery St San Francisco, CA 94104-1207

Wells Fargo Dealer Services Attn: Bankruptcy PO Box 19657 Irvine, CA 92623-9657

Wells Fargo Dealer Svc PO Box 1697 Winterville, NC 28590-1697

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B201B (Form 201B) (12/09)

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United States Bankruptcy Court Northern District of Illinois, Eastern Division

Desc Main

IN RE:	Case No.	
Miller,, Joseph A. Jr.	Chapter 13	
Debtor(s)	•	
CERTIFICATION OF NOTICE TO UNDER § 342(b) OF THE B		
Certificate of [Non-Attorney] Bar	akruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signing the debtor's p notice, as required by § 342(b) of the Bankruptcy Code.	etition, hereby certify that I delivered to the debtor the attached	
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	principal, responsible person, or partner of the bankruptcy petition preparer.)	
X Signature of Bankruptcy Petition Preparer of officer, principal, responsible partner whose Social Security number is provided above.	(Required by 11 U.S.C. § 110.) ble person, or	
Certificate of th	e Debtor	
I (We), the debtor(s), affirm that I (we) have received and read the attac	hed notice, as required by § 342(b) of the Bankruptcy Code.	
Miller,, Joseph A. Jr. Printed Name(s) of Debtor(s)	Signature of Debtor Date	
Case No. (if known) X	Signature of Joint Debtor (if any) Date	

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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 $_{B201B\ (Form\ 2C18)}$ Case 18-16429

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Desc Main

Document Page 55 of 55 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

IN RE:		Case No.
Miller,, Joseph A. Jr.		Chapter 13
	Debtor(s)	•

CERTIFICATION OF NOTI UNDER § 342(b) OF T		
Certificate of [Non-Attorne	y] Bankruptcy Petiti	on Preparer
I, the [non-attorney] bankruptcy petition preparer signing the debenotice, as required by § 342(b) of the Bankruptcy Code.	otor's petition, hereby co	ertify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X	esponsible person, or	(Required by 11 U.S.C. § 110.)
	e of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read the	ne attached notice, as re	quired by § 342(b) of the Bankruptcy Code.
Miller,, Joseph A. Jr.	Χ	6/08/2018
Printed Name(s) of Debtor(s)	Signature of Del	otor Date
Case No. (if known)	_ X	at Debtor (if any) Date
	Signature of Joir	nt Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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